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LETTERS TO THE EDITOR



[*The Editor is not responsible for opinions expressed in this Department.*]

NEW YORK, September 3, 1904.

The Editor American Journal of Nursing, Rochester, N. Y.

DEAR MADAM: Bishop Rowe, of Alaska, writes to me that he has urgent need for at least two or three additional trained nurses on his staff. He has at the present time six missionary hospitals in various parts of Alaska. He particularly needs a woman for Circle City on the Yukon, where she would probably have sole charge; for Valdez, on the southern coast, where she would be an assistant to the nurse in charge; and at Ketchikan, in the south, where the arrangement would be similar to that at Valdez.

The woman who goes to Circle City should be a person preferably not under thirty, and with a good background of experience. For the other positions younger and less experienced women might be used, but in any case it is necessary that they should be excellent nurses.

The qualifications may be briefly summed up as follows:

1. Communicant membership in the Protestant Episcopal Church.
2. Robust health and ability to live in the Alaskan climate. Circle City has a rigorous winter. Valdez is fairly cold with a great deal of snow. Ketchikan has a milder climate, probably no more severe than that of New York State during the winter.
3. A willingness to use professional skill for missionary needs; that is to say, in commending the Christian faith as our Church has received it to people who might not otherwise be influenced by it, and in trying to render all sorts of service to needy people, whites and Indians, because of one's own Christian faith.
4. Readiness to work under authority, either of the bishop or missionary or nurse in charge.
5. Ability to work in harmony with other people. Missionary life means that missionaries are thrown together in small groups with little other congenial company, and must therefore be people who can stand the strain of associating uninterruptedly with the same people.

As a rule our nurses in Alaska receive five hundred dollars a year. Quarters are provided. The missionary stipend is based on the principle of giving a support but practically nothing more.

The work is difficult and hard in many ways. At times the strain

is heavy; at other times there is less to do, but as a rule the nurses are occupied pretty steadily. The people to whom a nurse would have to minister would often be distasteful,—rough miners, uncouth Indians,—but without exception the nurses whom we already have there are enthusiastic about their work. This is due, of course, chiefly to the fact that they regard it first of all less from the professional than from the religious point of view.

If you can put me in communication with any young women who might be willing to consider such service, I shall be grateful. I hope that I have not seemed to make the service too hard and forbidding. It is not that by any means, as I think those who are doing it would be the first to testify; but it is well that a person considering it should not be misled into thinking that it would be similar in all respects to work here. The hours are less regular, the equipment is much more meagre, and one is thrown more completely on her own resources. Very truly yours,

JOHN W. WOOD, Secretary,
281 Fourth Avenue, New York City.

[THE following letter we shall answer in our next issue, and we invite the views of those who are giving special study to the subject of higher education. Miss Saffair has expressed what a great many nurses feel who find the life more of a grind than pleasure. Putting to one side motives of philanthropy, and judging the question from a plain, practical stand-point, "How will the higher education affect the nurse in private practice?"—ED.]

DEAR EDITOR: Permit me to say a few words in regard to our profession as I see it. For the last seven years a great deal has been done to improve it. Almost every training-school in the United States is constantly adding to its curriculum; from two years of training they have changed to three years; they have also raised the standard for admission into the schools, and the latest reform, the registration laws, will certainly put the profession on such a footing that every woman will be proud to belong to it.

All this is very inspiring, and we cannot help but respect and admire those women who have brought about these reforms. But there is one question I would like to ask our teachers and reformers, What does the future offer us more than the past?

They will say that it will give us a better standard. Granted. But will it make our lives easier? Much has been said and written of late about reforms in the profession, but all I can gather from it is that the public will certainly gain, also the teachers of training-schools, for they will deal with more intelligent and mature women. I do not mean to reflect upon the nurses of the past, but if I do I include myself, so I hope to be forgiven.

Will the future nurse not have to work so hard in the hospital while in training and after? Not a word do I hear about that. I think that the majority of nurses will bear me testimony that when we take up the profession we are very enthusiastic, and that helps us out with our hard work and discipline of the training, and we all look forward to the day when we will be free. That day arrives at last, and we are told that we are full-fledged nurses and can take up private nursing or a hospital position.

If we choose the former, what do we find: To be a successful nurse in private duty we have to adapt ourselves to all conditions and surroundings, and we have to eat food which we do not like, we have to get our sleep whenever we can and wherever the family puts us. We are entitled to two-hours' rest daily. Do we take it regularly? How often do we give our night's rest to our patient, and how often do we do twenty-four hours' duty on a stretch without any rest? But someone will say that we are well paid for it. I do not think so. Every skilled laborer is well paid here in America. The carpenter gets four dollars and fifty cents a day, and his day is only ten hours; the plumber gets three dollars and fifty cents for ten-hours' work. We, who are dealing with the most delicate and complicated structure, the human body, are paid twenty-five dollars a week, which is three dollars and fifty-seven cents a day—of twenty-four hours very often. To be sure, we do not work all the twenty-four hours, but we have to be on call. We have to keep up with the time by reading the latest books on nursing. When we are off a case, there is not a night but we might be wakened up from our best sleep, rain or shine, and be sent to a case.

And if we take up hospital life, what do we find there? The average hospitals pay their nurses in charge of wards between twenty-five and thirty dollars a month. The cooks in the same hospital received from twenty-five to forty dollars a month, and the latter did not go through a three-years' course, did not have to pass any examinations, whereas we are expected to possess a certain education before we enter the school, to pass three years of hard work that no one can realize but those who have been through it. Our conduct is watched; our manners are criticised; we do not get the same food as the superintendent of the hospital or the internes; we live in some of the hospitals in dormitories. After all that, I say, we are offered twenty-five dollars a month.

A position was offered to the writer not long ago to take charge of two wards, male surgical, of forty beds, male pupils, a small operating-room attached to the wards for minor operations, and as that hospital has the largest ambulance service in New York City I could expect a good number of *minor* operations. I was asked if I was a good teacher

and also a good manager. For all that I was offered thirty dollars a month. Now, I ask, what profession expects so much of those who take it up and gives so little in return? How many women do we have among us who can say that they have done twenty-five-years' active work and are not physically wrecks? I think it is about time that this question is looked into.

ROSA A. SAFFEIR,
137 East Fortieth Street.

DEAR EDITOR: Your suggestion and remarks about raising money for the Columbia course were so excellent that I am forwarding my mite in hopes it will be one of many hundreds. What a splendid thing it would be if the nurses of America were to endow this course themselves, in courageous and active self-help, instead of thinking "Mr. Millionaire ought to endow it," or "Mrs. Billionaire will perhaps give some money to it"? Our nurses are actually able to do it if they will. They are, on the whole, a well-paid set of women. And would it not be a glorious opportunity for the modern nurse to prove that she really does appreciate her advantages, and that she really does wish to pay the debt of the past and to invest in the future?

I am sure that nurses to-day would be glad to show that they too can make some sacrifice for their profession, to which our pioneers gave all that they had. And it is most important, too, to remember the warnings of the Special Course Committee, not to allow the control of the course to be taken out of the nurses' hands. Yours truly,

L. L. DOCK.

[Miss Dock's contribution was twenty-five dollars.—Ed.]

DEAR EDITOR: As the fall of the year approaches our thoughts naturally revert to the winter work. The meetings of the Manhattan and Bronx Association will commence in October. Let us hope that all members of that association will take up the work with renewed health and vigor and make vigorous efforts to attend the meetings and become interested. It has been hard, sometimes, to get a quorum. Out of a membership of seventy-five surely such ought not to be the case. Yet when speaking to members individually the fault seems to be procrastination—always putting off, waiting until the next time. The next time comes and something else happens. When one thinks that it only means eight meetings in all, and that those who have attended religiously are busy nurses, a very little effort on the part of other members might help the work along by introducing a new element, making the meetings recreational occasionally. The more people one meets, the pleasanter

the meetings; the more ideas and thoughts introduced, the less likelihood of getting into a rut. Expansion is what we need in all ways.

The nursing world just now is on the threshold of a great future, a period of evolution. The private nurses of New York have a right to take some part in this process of evolution, to have some say in matters which concern them now and may concern them more in the future. As individuals only a limited amount of good can be done, but as a body a great deal may be accomplished. Therefore let us have a few more workers, enthusiastic, helpful, and earnest. We have many promises already, and I am sure this winter's work will bear good fruit.

We certainly have much to be thankful for for the good work done by the officers of the association who attended so faithfully all last winter in spite of their own arduous work, in some cases one person doing the work of two, and not only for the doing of it, but for the manner of the doing, without any feeling of resentment, but just because of the great interest in the work. It is just such workers as that who have helped great measures, not the lackadaisical ones.

M. A. MOORE.

[LETTERS to the Editor must be accompanied by the name in full and address of the writer, otherwise such communications cannot be recognized. The name need not appear in the JOURNAL unless so desired.—ED.]



A SAFE PRESERVATIVE FOR MILK.—The *New York and Philadelphia Medical Journal* says: "*Presse médicale* states that P. Diffloth, Adolphe Renard, and Charles Nicolle have been studying the action of hydrogen dioxide on milk and have come to the conclusion that the best method for preserving that fluid is to add from one to two per cent. of the antiseptic as soon as possible after milking, and to leave the milk in a cool place from six to eight hours before it is used. The milk thus treated is tasteless and odorless, and does not differ in any way from fresh milk. When churned it coagulates in exactly the same time. Hydrogen dioxide cannot be compared to other antiseptics, the addition of which to milk is justifiably prohibited. While the latter, in order to be effective, must often be used in toxic doses and remain subsequently in the milk for an indefinite period, hydrogen dioxide disappears entirely in a short time. In contact with milk it is decomposed into nascent oxygen and water, so that at the end of a few hours no trace of it remains."